IN THE SPECIFICATION

Please replace paragraph [002] with the following:

The present invention relates to a non-provisional U.S. application serial number ~~10/xxx,xxx~~ 10/629,424 (Atty Dkt P-10978.00) entitled, "Apparatus and Method for Hemodynamic-Based Optimization of Cardiac Pacing," invented by Kjellstrom et al. and filed on common date herewith, the contents of which are hereby incorporated by reference herein.

Please replace paragraph [012] with the following:

In U.S. Patent No. 6,804,555 to Warkentin a system and method for monitoring the QRS duration is provided wherein processing QRS duration signals provides data from which the onset or progression of heart failure is determined. In the Warkentin patent, adjusting SAV/PAV delays and/or V-V delays provides a way to improve delivery of synchronous pacing pulses as a function of QRS duration. The SAV/PAV/V-V delays are varied from the prevailing delays as a function of the measured width of the QRS complex. The Warkentin patent was filed 29 June 2001 and is entitled, "Multi-site Ventricular Pacing System Measuring QRS Duration," is hereby incorporated by reference herein.

Please replace paragraph [067] with the following:

~~Before addressing the details contained in FIG. 7, one should consider the general application of the teaching of the present invention.~~ As previously described herein, during iterative cycling among different pacing interval sets a variety of pressure measurements are made and the resultant discrete direct pressure values (and any derived and/or integrals thereof) are stored in connection with the pacing intervals that produced the values. The pressure measurements are deemed to represent an evoked systemic hemodynamic state for the patient and, as such, after a new pacing interval set is implemented a

settling period may beneficially provide a more accurate assessment of each such hemodynamic state. The measured pressures and related data reflective of a new hemodynamic state are compared and the most desirable hemodynamic state selected. Then, the pacing intervals that correspond to the most desirable hemodynamic state are programmed as operative parameters for the delivery of a multi-chamber cardiac stimulation therapy, such as CRT.